

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

SYNE225/C4-US

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GLIAL DERIVED NEUROTROPHIC FACTOR

the specification of which (check only one item below):

☐ is attached hereto.☐ was filed as United States application

Serial No. \_\_\_\_\_

on \_\_\_\_\_

and was amended

on \_\_\_\_\_

(if applicable).

☒ was filed as PCT international application

Number PCT/US92/07888

on \_\_\_\_\_

17 September 1992 (17.09.92)

and was amended under PCT Article 19

on \_\_\_\_\_

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

## PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
07/764,685	20 September 1991			X
07/774,109	08 October 1991			X
07/788,423	06 November 1991			X
07/855,413	19 March 1992			X
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

SWANSON, Barry J., Reg. No. 33,215, BEATON, Glenn K., Reg. No. 30,995  
FOLSOM, Thomas C., Reg. No. 35,514

## Send Correspondence to:

Barry J. Swanson, Esq.  
BEATON & SWANSON, P.C.  
4582 S. Ulster St. Pkwy., #403  
Denver, CO 80237

Direct Telephone Calls to:  
(name and telephone number)

Barry J. Swanson  
(303) 850-9900  
(303) 850-9401 FAX

201	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		LIN	LEU-FEN	H.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Boulder	COLORADO	
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		5875 Orchard Creek Lane	Boulder	CO 80301 USA
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		COLLINS	FRANKLIN	D.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Agoura Hills	CA	USA
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		29356 Laro Drive	Agoura Hills	CA 91301 USA
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		DOHERTY	DANIEL	H.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Boulder	Colorado	USA
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		719 Ithaca Drive	Boulder	CO 80303 USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201

SIGNATURE OF INVENTOR 202

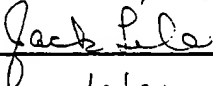
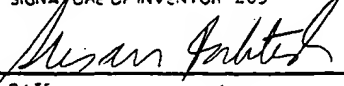
SIGNATURE OF INVENTOR 203

DATE

DATE

DATE

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR SIGNATURE BY FOURTH AND SUBSEQUENT INVENTORS

204	FULL NAME OF INVENTOR	FAMILY NAME LILE	FIRST GIVEN NAME JACK	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Nederland	STATE OR FOREIGN COUNTRY Colorado	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1901 County Road 68 J	CITY Nederland	STATE & ZIP CODE/COUNTRY Colorado, USA
205	FULL NAME OF INVENTOR	FAMILY NAME BEKTESH	FIRST GIVEN NAME SUSAN	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Boulder	STATE OR FOREIGN COUNTRY CO	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3344 34th Street	CITY Boulder	STATE & ZIP CODE/COUNTRY CO 80301 USA
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
				
DATE 2/9/94		DATE 1/24/94		DATE

Added Page to Combined Declaration and Power of Attorney